LA TEST # 6 FORMS REQUIRED: FORM 1040,SCH B, INFORMATION RETURNS ATTACHED: ENTRIES NOT REQUIRING FORMS: OTHER: FORM 1310 NAME OF CLAIMANT:			SCH E BROTHER A. SMITH	
ADDRESS:			122 TORCH STREET EW ORLEANS, LA	
70112			SS#400-55-7777	
PART I: PART II:			C	
LINE 1:			NO	
LINE 2A:			NO	
LINE 2B:			NO	
LINE 3: THIRD PARTY DESIGNEE:			YES YES	
THIRD PART I DESIGNEE:	MI	CHAELANG	ELO FETTUCCINO	
PHONE:	252-291-2344			
PIN:			54321	
PREPARED BY:				
TAXPAYER NAME:		LA	TEST O OLYMPICS	
DOB:	SSN:400-00-4309 4/21/1970			
OCCUPATION:	INVESTMENT SPECIALIST			
DISABLED:	YES			
PRES ELEC FUND:	YES			
DAYTIME PHONE:	404-555-1020			
BLIND:	NO MARIEGO VIANEGO			
SPOUSE NAME: SSN:	MABLE S OLYMPICS 400-00-6666			
DOB:			7/21/1938	
OCCUPATION:	DECEASED			
DISABLED:			NO	
PRES ELEC FUND:			NO	
BLIND:			YES	
CHECK DIGITS FROM IRS LABEL:			OT	
ADDRESS:		NEWO	121 TORCH ST	
FILING STATUS: LINE 6d:		NEW O	RLEANS, LA 70112 MARRIED JOINT 4	
YEAR SPOUSE DIED:			10/15/2006	
DEPENDENT INFORMATION:				
			CHILD TAX	
NAME AGE SSN	RELATIONSHIP	#MO	CREDIT	
WENDY OLYMPICS 9 400-55-3025	DAUGHTER	12	X	
WYATT OLYMPICS 6 400-00-4010	SON	12	X	
LA TEST # 6				

LA TEST # 6

**SCHEDULE B**:

**PART I:** 

LINE 1:

#### FIRST BANK 6,200

Other State Interest-Texas 1600

PART III:	
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LINE 7a: NO LINE 8: NO

THIRD PARTY DESIGNEE: MICHAELANGELO FETTUCCINI

PH: 252-291-2344

PIN 54321

# **SCHEDULE E** page 2 line 28A(g) 10410

AMOUNT PAID ON YOUR BEHALF BY A COMPOSITE PARTNER: 625

TYLER DAVID LP 735649821

#### FORMS INCLUDED: FORM 1040

Form 1040:

Taxpayer's first name, initial, last name LATEST O OLYMPICS Taxpayer's social security number 400-00-4309 Home address (number and street) 121 TORCH ST City, state, and zip NEW ORLEANS, LA 70112 Taxpayer's Presidential Election Campaign Fund Filing status MARRIED FILING JOINT Year spouse died 2005 Line 6a: Yourself (exemption) X Number of boxes checked on 6a and 6b Line 6c:Dependent #1:Name WENDY OLYMPICS Social security number 400-55-3025 Relationship DAUGHTER Qualifying child X

Dependent #2: Name WYATT OLYMPICS Social security number 400-00-4010 Relationship SON Qualifying child X Number of children who lived with you 2 Line 6d:Total number of exemptions claimed 4 Line 7: Wages, salaries, and tips 25300 Line 8a: Taxable interest 6200 1600 35700 33540

Line 8b: Tax-exempt interest line 16a:Pensions and annuities line 16b:Taxable amount of pensions and annuities (8915) Line 17: Rental real estate, royalties, partnerships 10410 Line 20a Social security benefits 1000 Line 20b Taxable amount of Social Security 850 Line 21: Other income 2500 **ROULETTE** Literal 2500 Line 22: Total income 78800 Line 30 Penalty on early withdrawal of savings 4510 Line 37: Adjusted gross income 74290

Line 38: Enter amount from line 37 74290 Line 40: Itemized deductions or standard deduction 12300 Line 41:Subtract line 40 from line 38 61990 Line 42: Multiply \$3300 by the total number of exemptions claimed on line 6d1 13200 Line 43:Taxable income 48790 Line 44:Tax

6561 Line 46:Add lines 44 and 45 6561 Line 53:Child tax credit 2000

Line 55Other Credits Line 55b:Form 8801 Line 56:Total credits 2000 Line 57:Subtract line 56 from line 46 4561 Line 63:Total tax 4561 Line 64: Federal income tax withheld from Forms W-2 and 1099 6177 Line 72:Total payments 6177 Line 73:OVERPAYMENT 1616 Third party designee: YES Taxpayer's occupation: **INVESTMENT SPECIALIST** Daytime phone number: 404-555-1020

# LA TEST # 6

FORM W-2 #1:

Box 17:State Income Tax

Box b:Employer identification number 72-8765411 Box c:Employer's name, address, and zip code LA INVESTMENT BANKERS 2310 FUNDS STREET BATON ROUGE, LA 70821 Box d:Employee's social security number 400-00-4309 Box e:Employee's first name, initial, and last name LATEST O OLYMPICS Box f:Employee's address and zip code 121 TORCH ST New Orleans, La 70122 Box 1:Gross Distribution 21000 Box 2:Federal income tax withheld 5000 Box 3:Social security wages 21000 Box 4:Social security tax withheld 1302 Box 5:Medicare wages and tips 21000 Box 6:Medicare tax withheld 305 Box 15:State Employers State ID LA3521016001 Box 16:State Wages, tips, etc: 21000

2500

## LA TEST #6

FORM W-2 #2:

Box b:Employer identification number 43-8885556 Box c:Employer's name, address, and zip code United States Navy 95300 Pennsylvania Ave Washington DC 20044 Box d:Employee's social security number 400-00-4309 Box e:Employee's first name, initial, and last name LATEST O OLYMPICS Box f:Employee's address and zip code 121 TORCH ST **NEW ORLEANS LA 70112** Box 1:Gross Distribution 2100 Box 2:Federal income tax withheld 400 Box 3:Social security wages 2100 Box 4:Social security tax withheld 130 Box 5:Medicare wages and tips 2100 Box 6:Medicare tax withheld 30 Box 15:State Employers State ID UT 5611654001 Box 16:State Wages, tips, etc: 2100

0

## LA TEST #6

FORM W-2 #3:

Box 17:State Income Tax

Box b:Employer identification number NATIONAL ASSOC OF NATIVE AMERICAN TRIBESMAN Box c:Employer's name, address, and zip code 8553 BLACKFOOT ST CHOCTAW, LA 7082172-4658821 Box d:Employee's social security number 400-00-4309 Box e:Employee's first name, initial, and last name LATEST O OLYMPICS Box f:Employee's address and zip code 121 TORCH ST **NEW ORLEANS LA 70112** Box 1:Gross Distribution 2200 Box 2:Federal income tax withheld 112 Box 3:Social security wages 2200 Box 4:Social security tax withheld 136 Box 5:Medicare wages and tips 2200 Box 6:Medicare tax withheld 32 Box 15:State Employers State ID LA 3358920001 Box 16:State Wages, tips, etc: 2200 Box 17:State Income Tax 0

Payer's Name: LAND BASED CASINO Payer's street address 8393 VEGAS ST Payer's city, state, and zip code NEW ORLEANS, LA, 70120 Federal identification number 72-7596432 Box 1:Gross Winnings 2500 Box 2:Federal income tax withheld 250 Box 3:Type of wager **ROULETTE** Box 4:Date won 6/14/2006 Box 9:Winner's taxpayer ID no 400-55-6666 Winner's Name: MABLE S OLYMPICS Winner's street address 121 TORCH ST Winner's city, state, and zip code **NEW ORLEANS LA 70112** Box 13:State/Payer's state ID no LA 7822764001 LA TEST # 6 Form 1099-R #1: RETIREMENT DATE (05-15-2003)Payer's name, street address, city, state, and zip FEDERAL PENSION FUND 2490 BIG APPLE ST NEW YORK, NY 10010 Payer's federal identification number 72-4328801 Recipient's identification number 400-00-4309 Recipient's name LATEST O OLYMPICS Recipient's street address 121 TORCH ST Recipient's city, state, and zip **NEW OELEANS LA 70112** Box 1:Gross Distribution 15000 Box 2a:Taxable amount 12840 Box 4:Federal income tax withheld 0 Box 7:Distribution code 7 Box 11:State/payer's state number LA 4796235001 Box 12State distribution 12840 LA TEST #6 Form 1099-R #2: RETIREMENT DATE (05-15-2003)Payer's name, street address, city, state, and zip LOUISIANA RETIREMENT SYSTEM 14286 GOVERNMENT BLVD BATON ROUGE, LA 70821 Payer's federal identification number 72-2234568 Recipient's identification number 400-00-4309 Recipient's name LATEST O OLYMPICS Recipient's street address 121 TORCH ST Recipient's city, state, and zip **NEW ORLEANS LA 70112** Box 1:Gross Distribution 15200 Box 2a:Taxable amount 15200 Box 4:Federal income tax withheld 415 Box 7:Distribution code LA 3479625001 Box 11:State/payer's state number Box 12State distribution 15200

# LA TEST #6

Form 1099-R #3:

RETIREMENT DATE (05-15-2003)
Payer's name, street address, city, state, and zip OTHER RETIREMENT SYSTEM

123 ANYWHERE STREET BATON ROUGE, LA 70808 Payer's federal identification number 72-9981728 Recipient's identification number 400-00-4309 Recipient's name LATEST O OLYMPICS Recipient's street address 121 TORCH ST Recipient's city, state, and zip **NEW ORLEANS LA 70112** Box 1:Gross Distribution 3500 Box 2a:Taxable amount 3500 Box 4:Federal income tax withheld 0 Box 7:Distribution code 7 Box 11:State/payer's state number LA 4896135001 Box 12State distribution 3500

Form 1099-R #3:

RETIREMENT DATE (05-15-2003)

Payer's name, street address, city, s DISABILITY RETIREMENT

123 ANY STREET BATON ROUGE, LA 70808

Payer's federal identification number 72-7381728

Recipient's identification number 400-00-4309

Recipient's name LATEST O OLYMPICS

Recipient's street address 121 TORCH ST

Recipient's city, state, and zip

NEW ORLEANS LA 70112

Box 1:Gross Distribution 2000
Box 2a:Taxable amount 2000

Box 4:Federal income tax

8 7:Distribution code

Box 7:Distribution code 7
Box 11:State/payer's state LA 3496135001

Box 12State distribution 2000